

Washington Metropolitan Area Transit Commission

2015 Carrier Annual Report Form

Read the accompanying instructions carefully before completing this form.



1. CARRIER INFORMATION:

| | | | | |
|--|------------------------|-------------|---------------|------------|
| 2270 | Nadilimo, Inc. | | | |
| *WMATC No. *Name of Carrier (as shown on certificate of authority) | | | | |
| 6740 Metropolitan Center Drive, #201 | | Springfield | VA | 22015-4580 |
| *Street Address of Principal Place of Business | Apt./Suite | City | State | Zip |
| Mailing Address (if different from street address) | Apt./Suite | City | State | Zip |
| (703) 597-6895 | | | | |
| *Telephone | Other Telephone | Fax | E-mail | |

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

| | | | |
|-----------|----------|------------------------------------|------------------|
| USDOT No. | DCTC No. | Virginia DMV passenger carrier No. | Maryland PSC No. |
|-----------|----------|------------------------------------|------------------|

3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

| | |
|------------------------|---|
| Mr. Abdelouahad Nadifi | Corporate Officer |
| *Name | *Title |
| (703) 597-6895 | |
| *Telephone | Other Telephone Fax E-mail |

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria, Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

| | | | | |
|--|------------|--------|-------|-----|
| Name of Registered Agent for Service of Process | Telephone | E-mail | | |
| Agent Address (must be inside Metropolitan District) | Apt./Suite | City | State | Zip |

